

JUN 09 2005

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Mueting, Raasch & Gebhardt, P.A.  
 203 Textile Building  
 119 N. Fourth Street  
 Minneapolis, MN 55401

Jolene M. Golech (Depositor's name)  
 (Signature)  
 June 09, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/615,872	07/13/2000	Gowhari M. Arpally	2687-02/MC-166	4363

TITLE OF INVENTION: COMPOSITIONS AND METHODS USEFUL FOR THE DIAGNOSIS AND TREATMENT OF HEPARIN INDUCED THROMBOCYTOPENIA/THROMBOSIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	06/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
GRUN, JAMES LESLIE	1641	514-100000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Mueting, Raasch &  
 2 Gebhardt, P.A.  
 3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Science & Technology Corporation @ UNM Albuquerque, New Mexico

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 6

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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 43 4895 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Victoria A. Sandberg*

Date June 09, 2005Typed or printed name Victoria A. SandbergRegistration No. 41,287

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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01 FC:2501

18.00 DA

02 FC:8001

PATENT  
Docket No. 310.00340101IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): AREPALLY et al. ) Group Art Unit: 1641  
Serial No.: 09/615,872 ) Examiner: Grun  
Confirmation No.: 4363 )  
Filed: July 13, 2000 )

For: COMPOSITIONS AND METHODS USEFUL FOR THE DIAGNOSIS AND  
TREATMENT OF HEPARIN INDUCED THROMBOCYTOPENIA/THROMBOSIS

FACSIMILE TRANSMISSION TO THE PTO

MAIL STOP ISSUE FEE  
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Attn: Examiner Grun  
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Alexandria, VA 22313-1450

FAX NUMBER: (703) 746-4000  
Total Pages (including cover page): 3  
Time: (Central Time)  
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X Small Entity Status is entitled to be asserted in the above-identified application.

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of  
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Mueting, Raasch & Gebhardt, P.A.  
Customer Number: 26813

June 9, 2005  
Date

By: Victoria A. Sandberg  
Victoria A. Sandberg  
Reg. No. 41,287  
Direct Dial (612)305-1226

**CERTIFICATE UNDER 37 C.F.R. §1.8:** The undersigned hereby certifies that this Facsimile Cover Sheet and the  
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Patent and Trademark Office addressed to the MAIL STOP ISSUE FEE, Commissioner for Patents, Attn: Examiner  
Grun, P.O. Box 1450, Alexandria, VA 22313-1450, on this 9<sup>th</sup> day of June, 2005, at 1:30 PM (Central  
Time).

June 09, 2005  
Date

Signature: J. M. GALEST  
Name: JOLENE M. GALEST

If you do not receive all pages, please contact us at (612)305-1220 (ph) or (612)305-1228 (fax).